

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX January, 2006

Instructions and worksheet are on the reverse side of this return.



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D	ue	01	/31	/06	6

Company	·	MRS Insuranc	ce Account Number	
Address		Estimated F	φ.	
*Signature			PAYMENT MUST	ACCOMPANY RETURN
Telephone			Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120



FORM INS-2

Due 02/28/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX February, 2006

Instructions and workshee	et are on the	reverse side of this re	eturn. ^0631000^
	MRS Insuranc	ce Account Number	
		•	00
		PAYMENT MUST	ACCOMPANY RETURN
Must be signed by the President, Treasurer, Secretary, Chief ccounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.		Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120
1	Must be signed by the President, Treasurer, Secretary, Chief	MRS Insurance Estimated F (see instructions Must be signed by the President, Treasurer, Secretary, Chief	Estimated Payment (see instructions on back) PAYMENT MUST Must be signed by the President, Treasurer, Secretary, Chief Estimated Payment (see instructions on back) PAYMENT MUST Send return with check to:



FORM INS-2

Due 03/31/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX March, 2006



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P.O.Box 9120

Instructions and workshe	neet are on the reverse side of this return.				
Company	MRS Insuran	nce Account Number			
Address	Estimated I	Φ.			
*Signature		PAYMENT MUST	ACCOMPANY RETURN		
Name/Title		771711121111111001	7.000777		
Telephone*Must be signed by the President, Treasurer, Secretary, Chief Accounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.		Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P Augusta, ME 04332-9120		

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INTEREST & PENALTY

Beginning January 1, 2006, the interest rate is 0.833% per month; 10% per year, compounded monthly.

The penalty for failure to file a return on time is the greater of \$25 or 10% of the tax due, unless the return is filed more than 30 days after the receipt of a demand notice from the State Tax Assessor, in which case the failure-to-file penalty becomes 100% of the tax otherwise due.

The penalty for failure to pay a tax liability timely is 1% of the outstanding liability for each month or fraction thereof during which the failure continues, to a maximum of 25% of the outstanding liability.

STATUTORY REFERENCES

This return is made in compliance with 36 M.R.S.A. § 2521-A and 25 M.R.S.A. § 2399.

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FORM INS-2

Due 05/01/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX **April, 2006**



Instructions and worksheet are on the reverse side of this return. Company MRS Insurance Account Number **Estimated Payment** .00 (see instructions on back) *Signature PAYMENT MUST ACCOMPANY RETURN Name/Title

*Must be signed by the President, Treasurer, Secretary, Chief Accounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.

Make check payable to: Treasurer, State of Maine Send return with check to: Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120



Telephone

FORM INS-2

Due 05/31/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX

May, 2006



Instructions and workshee	t are on the i	reverse side of this re	eturn. "0031000"
	MRS Insuranc	e Account Number	
		PAYMENT MUST	ACCOMPANY RETURN
lust be signed by the President, Treasurer, Secretary, Chief counting Officer, or Attorney-in-Fact of a Reciprocal Insurer.		Make check payable to: Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120
	lust be signed by the President, Treasurer, Secretary, Chief	MRS Insurance Estimated Proceeding (see instructions) ust be signed by the President, Treasurer, Secretary, Chief	Estimated Payment (see instructions on back) PAYMENT MUST Make check payable to: Send return with check to:



FORM INS-2

Due 06/30/06

Accounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX

June, 2006



0631000

V	mistractions and workshe	ions and worksheet are on the reverse side of this return.			
Company		MRS Insuran	ce Account Number		
Address		Estimated I	Φ.		
*Signature			PAYMENT MUST	ACCOMPANY RETURN	
Name/Title			TATMENT MOOT	AGGGIIII AITT RETORIT	
Telephone			Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120	
	Must be signed by the President, Treasurer, Secretary, Chief			Augusta, ME 04332-9120	

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FORM INS-2

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX



Due 07/31/06 July, 2006 Instructions and worksheet are on the reverse side of this return.

Company Address		Estimated P	φ.	
		(see instructions	on back) \$	
*Signature			PAYMENT MUST	ACCOMPANY RETURN
Name/Title				
	Must be signed by the President, Treasurer, Secretary, Chief ccounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.	Q.	Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120



FORM INS-2

Due 08/31/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX August, 2006



Instructions and worksheet are on the reverse side of this return

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Company		MRS Insuranc	ce Account Number	
Address		Estimated P		
*Signature Name/Title			PAYMENT MUST	ACCOMPANY RETURN
Telephone	Must be signed by the President, Treasurer, Secretary, Chief counting Officer, or Attorney-in-Fact of a Reciprocal Insurer.		Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120



FORM INS-2

Due 10/02/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX September, 2006



A Second	Instructions and workshe	et are on the	reverse side of this re	eturn.
Company		MRS Insuran	ce Account Number	
Address		Catimata d C		
		Estimated F	ayment	
		(see instructions	on back) \$	
*Signature				
•			PAYMENT MUST	ACCOMPANY RETURN
Name/Title				
Telephone			Make check payable to:	Treasurer, State of Maine
relepriorie			Send return with check to:	Maine Revenue Services, P.O.Box 9120
	Must be signed by the President, Treasurer, Secretary, Chief	1		Augusta, ME 04332-9120
A	ccounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.			

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MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX October, 2006



FORM INS-
Due 10/31//06

A. Salar	Instructions and workshe	et are on the	reverse side of this r	eturn.
Company		MRS Insuranc	ce Account Number	
Address		Estimated P	<u></u>	
*Signature			PAYMENT MUST	ACCOMPANY RETURN
Name/Title				
	Must be signed by the President, Treasurer, Secretary, Chief ecounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.		Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120



FORM INS-2

Due 11/30/06

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX

November, 2006





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W.				
Company		MRS Insuranc	ce Account Number	
Address		Estimated F	Φ.	
*Signature			PAYMENT MUST	ACCOMPANY RETURN
Name/Title				
	Must be signed by the President, Treasurer, Secretary, Chief ecounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.		Make check payable to : Send return with check to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box 9120 Augusta, ME 04332-9120



FORM INS-2

Due 01/02/07

MAINE ESTIMATED MONTHLY RETURN FOR FIRE INVESTIGATION AND PREVENTION TAX

December, 2006

Instructions and worksheet are on the reverse side of this return.



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Company	MR	S Insurance Acco	unt Number	
Address		imated Paymer		
*Signature				ACCOMPANY RETURN
Name/Title				
Telephone	the President Treasurer Secretary Chief		check payable to:	Treasurer, State of Maine Maine Revenue Services, P.O.Box

Accounting Officer, or Attorney-in-Fact of a Reciprocal Insurer.

k 9120

Augusta, ME 04332-9120

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